

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|-----------|------------|-----------------|
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | <i>MT</i> | <i>32</i> | <i>2/14</i> |
| FORMALITY REVIEW | <i>MT</i> | <i>525</i> | <i>03/01/01</i> |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

- ✓ Rejected
- = Allowed
- (Through numeral) ... Canceled
- ÷ Restricted
- N Non-elected
- I Interference
- A Appeal
- O Objected

| Claim | Date |
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| Final Original 1 11/26/03 3/30/04 | |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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